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Area Production Superintendent

July 19, 1983

(Title)

(Date)

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLÓWABLE

Form C-104 Supersedes Old C-104 and C-110

FILE]	AND	Effective 1-1-65
U.\$.G.S.	AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	AS
LAND OFFICE	4	3063/N R	7 @ F 1 12 = -
IRANSPORTER OIL		4,0621	
GAS	1	2	
OPERATOR	-	· .	لا ١١٤٤ الال
PRORATION OFFICE Operator			
Union Texas Petroleum	Corporation	OIL	CON, DIV.
Address	. 002,		DIST. 3
P. O. Box 808, Farmir	ngton, New Mexico 87499		-,0,, 3
Reason(s) for filing (Check prope box		Other (Please explain)	1 des deta HTD
New Well	Change in Transporter of:	This well began	producing into UTP 2/83 for testing.
Recompletion	Off Dry Gas		2/05 101 testing.
Change to Ownership	Casinghead Gas Condens	sate	
If change of ownership give name			
and address of previous owner			
TERRETORION OF HELL AND	TEACE		
Lease Name	Well No. Pool Name, Including Fo		1
_	15 Undesignated (Gallup State, Federa	Fed. SF 047020-B
Congress			
	7 Fee: From The North Line	and 2169 Feet From	The West
Omit Letter			County
Line of Section 35 To	ownship 29N Range	11W , NMPM, San J	uan County
	THE PART OF THE PART OF THE	.	
. DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GAS	Address (Give address to which appro	ved copy of this form is to be sent)
Name of Authorized Transporter of O	··	P O Box 489. Bloomfi	eld, N.M. 87413
Plateau, Inc.	osinahega Gas ar or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
		P. O. Box 808, Farming	ton, N.M. 87499
Union Texas Petroleu	Unit Sec. Twp. Pge.	Is gas actually connected? Wh	er
If well produces oil or liquids, give location of tanks.	C 35 29N 11W_	Yes 6	/21/83
	with that from any other lease or pool,	give commingling order number:	
If this production is commingled w. COMPLETION DATA	vitn that from any other reast of pros,		Plug Back Same Resty, Diff. Resty
	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Nes Dim Nes
Designate Type of Complet	ion - (A) XX	XX	P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
5/16/83	6/8/83 Name of Producing Formation	6030 Top 011/Gas Pay	5980 Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)			5872
5646 R.K.B.	Gallup	5369	Depth Casing Shoe
Perforations			6026
5369 - 5943	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	9-5/8", 36.00#, K-55	307	319 cu. ft.
8-3/4"	7", 23.00#, K-55	5260	3235 cu. ft. (2 stages
6-1/4"	4-1/2", 11.60#, K-55	5038 - 6026	239 cu. ft.
	2-3/8", E.U.E., 4.70#	5872	in the second top allow
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this di	ifter recovery of total volume of load of epth or be for full 24 hours)	l and must be equal to or exceed top diss
OU WELL	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
Date First New Oil Bun To Tanks		Pumping	
6/22/83	6/30/83	Casing Pressure	Choke Size
Length of Test	40	80	1/2"
24 hours Actual Prod. During Test	Oil-Bbis.	Water - Bbis.	Gas-MCF
	16	5	138
16 bbl. oil			
GAS WELL			Gravity of Condensate
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
		4 0 1 4 0 1	Choke Size
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Chore 5.25
			ATION COMMISSION
VI. CERTIFICATE OF COMPLIANCE		OIL CONSER	ATION COMMISSION
		7-29-83 111 8	y 130.\
I hereby certify that the rules as	nd regulations of the Oil Conservation	AFFROVED	W. T. CHAVET
Commission have been complied	d with and that the information given the best of my knowledge and belief.	Original Staned by FKA	VK I. (HAVEL
above is time and complete to	-	Surenvisor D	NSTRICT # 3
. /	1111		- compliance with mill F 1104.
11 11 0	K ////.	- 1	n compliance with RULE 1104.
Tenneth E. Hoddy		If this is a request for allowable for a newly drilled or deepene If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation	
Kenneth E. Roddy (5	lignature)	well, this form must be accounted to taken on the well in ac	cordance with RULE 111.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.